PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

Application or Docket Number	
Application or Docket Number	2
11017 2000	

4017-02806

CLAIMS AS FILED - PART I (Column 1)			(Column 2)			SMALL ENTITY TYPE		OTHER THAN OR SMALL ENTITY				
TOTAL CLAIMS		11		(Column 2)		ſ	RATE	FEE		RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA		}	BASIC FEE			BASIC FEE	750.00
TOTAL CHARGEABLE CLAIMS]/ minus 20=		* &			V¢ 0-	<u></u>	1	X\$18=	
INDEPENDENT CLAIMS			minus 3 =		7		F	X\$ 9=		OR		
MULTIPLE DEPENDENT CLAIM PRI								X42=	84	OR	X84≈	
								+140=		OR	+280=	
*	the difference	in column 1 is	less than ze	zero, enter "0" in column 2				TOTAL	459	OR	TOTAL	
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)								SMALL ENTITY			OTHER SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	. 11	Minus	+0	0	=		X\$ 9=	. ,	OR	X\$18=	
	Independent	NTATION OF M	Minus	*** (5 CLAIM			X42=		OR	X84=	
	THOTTRESE	·		·	CEANIVI		' [+140=		OR	+280=	
:				,		•	 A	TOTAL DDIT. FEE		OR	TOTAL ADDIT, FEE	
(Column 1) (Column 2) (Column 3)												
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		a		X\$ 9≠		OR	X\$18=	
AME	Independent	*	Minus	***		<u> </u> -		X42=		OR	X84=	
	FIRST PRESE	NTATION OF MI	JETIPLE DEI	PENDENT	CLAIM		┚┢	+140=			+280=	
							L	TOTAL		OR	TOTAL	
		(Calumn 1)		(Calua	O\	(Calina a)		DDIT. FEE		OR	ADDIT: FEE	
		(Column 1) CLAIMS		(Colur HIGH		(Column 3)	1 -		 .	1		
AMENDMENT C		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDN	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***	<u> </u>	=	╽┟	X42=		OR	X84=	
	FIRST PRESE	NTATION OF M	JLTIPLE DEI	PENDENT	CLAIM		▎├					
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR.	+280=	
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ADDIT. FEE ADDIT. FEE												
•	The "Highest Nurr	ber Previously Pa	id For" (Total o	r Independi	ent) is the	highest number	r foun	d in the app	ropriate box	in col	umn 1.	